

RECEIVED
CENTRAL FAX CENTER

Law Offices of
SENNIGER POWERS

APR 08 2005

One Metropolitan Square, 16th Floor
St. Louis, Missouri 63102

Telephone (314) 231-5400
Facsimile (314) 231-4342

FACSIMILE TRANSMITTAL COVER SHEET

DATE: 4/8/2005 ATTORNEY DOCKET NUMBER: KCC 4729.1 (K-C 16,210.1)

PTO FACSIMILE NUMBER: (703) 872-9306

PLEASE DELIVER THIS FACSIMILE TO: Examiner Jimmy G. Foster
THIS FACSIMILE IS BEING SENT BY: Richard L. Bridge
NUMBER OF PAGES: 27 INCLUDING COVER SHEET

TIME SENT: 4:14 pm OPERATOR'S NAME Michelle

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to
the Patent and Trademark Office on the date shown below.

Michelle Grindstaff
Typed or printed name of person signing certification

M. Grindstaff
Signature

4/8/05

Date

Type of paper transmitted: Amendment D

Applicant's Name: Nichols et al.

Serial No. (Control No.): 10/010,934 Examiner: Foster

Filing Date: 11/13/2001 Art Unit: 3728

Application Title: PACKAGE

IF YOU DO NOT RECEIVE ALL PAGES CLEARLY, CALL BACK AS SOON AS
POSSIBLE. CONFIRMING NUMBER IS (314) 231-5400.

FEE TRANSMITTAL

Application Number 10/010,934 Art Unit 3728
 Filing Date November 13, 2001 Confirmation No. 8461
 Inventor(s) Ann M. Nichols, et al.
 Examiner Name Jimmy G. Foster
 Attorney Docket Number KCC 4729.1 (K-C 16,210.1)

Applicant claims small entity status.

METHOD OF PAYMENT

- The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.
- Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. BASIC FILING, SEARCH AND EXAMINATION FEES
 (Type: _____) Subtotal (1) \$ _____

2. EXCESS CLAIM FEES

Total Claims 19 - 21 (HP) = 0 x Fee 0 = \$0
 Indep Claims 4 - 3 (HP) = 1 x Fee 200 = \$200.00
 Multiple Dependent Claims Fee _____
 (HP = highest number of claims paid for) Subtotal (2) \$200.00

3. APPLICATION SIZE FEE

Total Pages _____ - 100 = _____ ÷ 50 = _____ x \$250 = \$ _____
 (Application + Drawings)
 Subtotal (3) \$ _____

4. OTHER FEE(S)

- month extension of time
- Information disclosure statement
- 37 CFR 1.17(q) processing fee
- Non-English specification
- Notice of Appeal
- Filing a brief in support of appeal
- Request for oral hearing
- Other: _____

Subtotal (4) \$ _____

TOTAL AMOUNT OF PAYMENT \$200.00


 Richard L. Bridge, Reg. No. 40,529
 Telephone: 314-231-5400

4/8/05
 Date

RLB/tmg

APR-08-2005 FRI 04:15 PM SENNIGER POWERS

FAX NO. 3142314342

P. 03

KCC 4729.1 (K-C 16,210.1)
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of Ann M. Nichols, et al.
Serial No. 10/010,934
Filed November 13, 2001
Confirmation No. 8461
For PACKAGE
Examiner Jimmy G. Foster

Art Unit 3728

RECEIVED
CENTRAL FAX CENTER
APR 08 2005

April 8, 2005

AMENDMENT D

TO THE ASSISTANT COMMISSIONER FOR PATENTS,
SIR/MADAM:

Please enter the following amendments in the above-
identified application.

Amendments to the claims begin on page 2.

Remarks begin on page 10.